



JUL 08 2004

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TECH CENTER 1600/2900

Docket No. 50995-B JPW/AJM/AG

re application of: Riccardo Dalla-Favera

Serial No.: 09/585,023

Examiner: S. McGarry

Filed : June 1, 2000

Group Art Unit: 1635

For : MUM-1 PROTEIN EXPRESSED BY MULTIPLE MYELOMA-RELATED GENE

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

July 2, 2004

S I R:

Transmitted herewith is an amendment to the above-identified application.

 X Small entity status of this application under 37 C.F.R. § 1.27
has been established by a verified statement previously
submitted.

 A verified statement to establish small entity status under
37 C.F.R. § 1.27 is enclosed.

 X No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE		FEE		
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
Total Claims	1	-	20	=	0	X	9	18	=	0	
Indepen- dent Claims	1	-	4	=	0	X	43	86	=	0	
Multiple Dependent Claim(s) Presented _____ Yes <u> X </u> No For First Time:							145	290		0	
							TOTAL ADDITIONAL FEE \$ 0				

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than
20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than
3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and
the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than
"0", write "0" in the space.

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The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed.

_____ Please charge Deposit Account No. _____ in the amount of \$ _____.

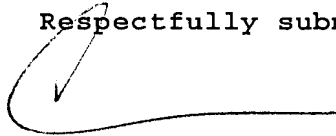
_____ A check in the amount of \$ _____ is enclosed.

 X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Three Copies of this sheet are enclosed.

 X Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

 X Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,



I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:
Commissioner for Patents,
P.O. Box 1450
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Alan J. Morrison
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Date

7/2/04

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